

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
21005034

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection

2. NAME OF OPERATOR
Amoco Production Co.

3. ADDRESS OF OPERATOR
501 Airport Drive, Farmington, N M 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 1980' FSL x 660' FWL

RECEIVED

MAY 09 1986

6. INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Navajo Tribal U

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Tocito Dome Penn D

11. SEC., T., R., M., OR R&L, AND
SURVEY OR AREA
NW/SW Sec. 21, T26N, R18W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐
PILL OR ALTER CASING ☐
MULTIPLE COMPLETION ☐
ABANDON* ☐
CHANGE PLANS ☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐
REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☐
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

7. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Amoco Production Company conducted a mechanical integrity test on the subject well on 4-25-86. The well pressure tested to 500 psi and held for 15 minutes. The test was witnessed by Carolyn J. Taplin of NMOCD, Aztec.

Since the test held and was approved by NMOCD, we do not intend to repair the subject well according to the procedure dated 4-22-86.

RECEIVED
MAY 19 1986
OIL CON. DIV.
DIST. 3

I hereby certify that the foregoing is true and correct

SIGNED B. Shaw TITLE Adm. Supervisor

DATE 5-7-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

ACCEPTED FOR RECORD

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCD

MAY 15 1986
FARMINGTON RESOURCE AREA

BY _____